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9	UNITED STATES DISTRI		
10	WESTERN DISTRICT OF WASHINGTON AT SEATTLE		
11	STATE OF WASHINGTON,	NO. 2:20-cv-01105	
12	Plaintiff,	DECLARATION OF MYRON BRADFORD	
13	V.	"MIKE" KREIDLER	
14	UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES;		
15	ALEX M. AZAR, in his official capacity as the Secretary of the United States		
16	Department of Health and Human Services,		
17	Defendants.		
18		•	
19	I, Myron Bradford "Mike" Kreidler, declare u		
20	the United States of America that the foregoing is true	e and correct:	
21	1. I am over the age of 18, have personal 1	knowledge of the facts and circumstances	
22	in this declaration, and am competent to testify in this	matter.	
23	2. I am the Insurance Commissioner for the	ne State of Washington. I was first elected	
24	in 2000 and have served continuously since then. I was re-elected to my fifth term in 2016.		
25	Before being elected Insurance Commissioner, I receiv	ed a master's degree in public health from	
26	UCLA, was a doctor of optometry, and practiced with	Group Health Cooperative for	

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twenty years. I also served sixteen years in the Washington State Legislature and two years as a member of the United States House of Representatives.

- 3. As the elected Insurance Commissioner, I am responsible for managing Washington's Office of the Insurance Commissioner (OIC), which protects Washington's insurance consumers and oversees and regulates the insurance industry. The OIC currently has approximately 246 employees and a statewide network of more than 400 volunteers. Among its responsibilities, the OIC licenses and audits the 38 insurers domiciled in Washington; regulates and may revoke the authorization or registration of the more than 2,100 other insurers that do business in Washington; and tests, licenses, and regulates the more than 182,000 individuals and businesses licensed to solicit insurance in Washington. As part of its regulation of health insurance, the OIC seeks to promote, among other goals, timely and non-discriminatory access to medical care and essential health benefits.
- 4. I am familiar with the rule of the Department of Health and Human Services entitled "Nondiscrimination in Health and Health Education Programs or Activities, Delegation of Authority," 85 Fed. Reg. 37160-248 (the "Final Rule"), which was published in the Federal Register on June 19, 2020.
- 5. I have been asked to evaluate how the Final Rule will impact legal protections for Washingtonians against discrimination in health care on the basis of their pregnancy termination, sexual orientation, and transgender status or gender identity.
- 6. Through review of information produced by the Washington State Office of Financial Management (OFM) and the Washington State Department of Health (DOH), I have learned the following background facts.
- 7. The population of Washington State is approximately 7,656,200 people as of April 1, 2020. Declaration of Thea N. Mounts, ¶ 5.
- 8. OFM estimates that as of 2018, there are at least 1,385,380 people in Washington State who receive health care coverage under a health care plan established and funded directly

by an employer rather than through the purchase of health insurance, also called a "self-insured"
or "self-funded" group health plan. Declaration of Thea N. Mounts, \P 7. OFM states that the
number is at least this high in 2020 because more and more small and medium-sized employers
are providing health care coverage for employees through a self-insured or self-funded group
health plan. <i>Id</i> .

- 9. OFM also estimates that, as of 2017, there are 198,301 people in Washington State who receive employment-based health insurance for government employees as part of the Federal Employee Health Benefits Program. Declaration of Thea N. Mounts, ¶ 9.
- 10. Section 514 of the Employee Retirement Income Security Act of 1974 (ERISA), 29 U.S.C. § 1144, provides that State laws relating to "self-funded" employer group health plans are superseded by ERISA.
- 11. As a result of Section 514 of ERISA, Washington state laws that prohibit discrimination in health care on the basis of pregnancy termination, sexual orientation, and transgender status or gender identity do not apply to these "self-funded" employer benefit plans. These state laws include the Washington Law Against Discrimination (WLAD), RCW 49.60.030(1)(e) and RCW 49.60.178, and state law prohibiting discrimination with respect to all aspects of fully-insured health plan design and administration, RCW 48.43.0128.
- 12. Similarly, Section 3 of the Federal Employees Health Care Protection Act of 1998, 5 U.S.C. § 8902(m)(1), provides that State laws are also superseded by the terms of any contract for health care coverage that is provided under the Federal Employees Health Benefits program.
- 13. As a result of Section 3 of the Federal Employees Health Care Protection Act of 1998, the prohibitions of discrimination in health care on the basis of pregnancy termination, sexual orientation, and transgender status or gender identity in the WLAD, RCW 49.60.030(1)(e) and RCW 49.60.178, and in RCW 48.43.0128 do not apply to these federal employee benefit plans.

1	14. Accordingly, because of the aforementioned provisions of ERISA and the Federal		
2	Employees Healthcare Protection Act, the health care coverage plans of approximately		
3	1,583,681 Washingtonians will not be prevented by Washington state law from discrimination		
4	on the basis of pregnancy termination, sexual orientation, or transgender status or gender identity		
5	if the Final Rule takes effect.		
6	15. DOH estimates that between 5,271 and 16,266 transgender Washingtonians are		
7	included in this group and could lose health care coverage for transgender health care services		
8	such as hormone therapies and surgical gender transition procedures if the Final Rule takes		
9	effect. Declaration of Michelle Roberts, ¶ 15.		
10	EXECUTED on this <u>13</u> day of July, 2020 in Seattle, Washington.		
11	Mile Kreidle		
12	Mike Kreidler		
13	Insurance Commissioner		
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